



Advance Care Planning

- What is advance care planning?
- How is a substitute decision maker selected?
- What is informed consent?



What is Advance Care Planning?

Advance Care Planning is a process for thinking about what kind of personal and health care is wanted in the future.

It is about preparing your substitute decision maker(s), to make health or personal care decisions.

The process involves:

- thinking about health decisions and care options
- sharing values and beliefs by having conversations with family, friends and health care providers
- selecting a Substitute Decision Maker (SDM)



What is Consent?

- Consent is a decision given by a patient or incapable patient's substitute decision maker to accept or refuse a treatment.
- Every province has its own rules on consent.
- In Ontario, the law is the Health Care Consent Act
 - Health care providers are required to get an informed consent before providing any treatment, except in an emergency situation when treatment may be provided without consent.

[Government of Ontario, 1996](#)

The Centre for Studies in Aging & Health at Providence Care

Copyright © CSAH 2020



3

What is Consent?

- The consent must be “informed”, fully explained, with risks and benefits outlined, in terms that are understandable.
- This means that, before giving consent, the person or substitute decision maker must be provided with information about:
 - the nature of the treatment
 - the expected benefits, risks and side effects of the treatment
 - alternative courses of action
 - the likely consequences of not having the treatment
- The consent is not informed until the person or substitute decision maker receives responses to any questions or requests for additional information about these matters.

The Centre for Studies in Aging & Health at Providence Care

Copyright © CSAH 2020



4

Role of the Substitute Decision Maker

- The role of the substitute decision maker is to:
 - make health and personal care decisions for the individual when they can not
 - consider the person's values and beliefs and respond accordingly
 - give consent or refuse a proposed treatment
 - act in the persons best interests

[Speak Up Ontario, 2019](#)

The Centre for Studies in Aging & Health at Providence Care


Copyright © CSAH 2020



5

Appointment of Substitute Decision Maker

A substitute decision maker can be appointed in 3 ways:



Court Appointed Guardian	Legally Appointed SDMs
Attorney for Personal Care	
Representative Appointed by Consent and Capacity Board	
Spouse of Partner	Automatic Family Member SDMs
Parents or Children	
Parent with right of access only	
Siblings	
Any other relatives	SDM of last resort
Public Guardian and Trustee	

Ontario's Health Care Consent Act, 1996

[Ontario Health Care Consent Act, 1996](#)

The Centre for Studies in Aging & Health at Providence Care

Copyright © CSAH 2020



6

Who can be a Substitute Decision Maker?

- The substitute decision maker must:
 - be mentally capable
 - be 18+ years old
 - not be prohibited by a court order or separation agreement to have access to the incapable person
 - be available, easy to access
 - be willing to assume the responsibility of giving consent or refusing treatments offered

[Speak Up Ontario, 2019](#)

The Centre for Studies in Aging & Health at Providence Care

Copyright © CSAH 2020



7

More about Substitute Decision Maker

- If you are not satisfied with your automatic substitute decision maker (example: husband, wife, partner adult children), you can choose another person(s) to be your substitute decision maker.
- In Ontario, a Power of Attorney for Personal Care form naming the substitute decision maker is required (this is not a lawyer).
- The document can be accessed [online](#) or by consulting a lawyer in order to complete the required document.
- The document must be witnessed by two people.
- A wallet card is good to have, indicating the name and contact information of the substitute decision maker.

The Centre for Studies in Aging & Health at Providence Care

Copyright © CSAH 2020



8

Sample Wallet Card

For information on how to complete your own Power of Attorney for Personal Care (POAPC) document, a [free](http://www.attorneygeneral.jus.gov.on.ca/english/family/pgt/poa.pdf) Ontario kit is available from:

www.attorneygeneral.jus.gov.on.ca/english/family/pgt/poa.pdf

For more information about ACP & HCC visit www.sagelink.ca

Wallet Card: Produced by the 11 DHR Advance Care Planning & Health Care Consent Working Group

THINK about what's important to you
LEARN about your care options
DECIDE who will speak on your behalf
TALK about your wishes, values and beliefs
RECORD your Substitute Decision Maker
REVIEW and REVISE your plan regularly, especially when something in life changes



In case I cannot provide consent for treatment, I have a Substitute Decision Maker who can speak for me if I am unable to communicate my wishes

The name of my Substitute Decision Maker is:

Relationship: _____

Phone #: _____

Alternate #: _____

My name is: _____

My Substitute Decision Maker (SDM) is listed on my Power of Attorney for Personal Care (POAPC) which is located _____

My SDM knows my wishes

I have talked with my Doctor about my wishes



Reflection...

Think about who you would select as your substitute decision maker if you do not select a family member.

Ideally the substitute decision maker would be someone that you have shared your wishes with. Remember that they should be willing to fulfill the role.

Advance Care Planning and Consent

- Health care providers are required by law to obtain informed consent to start or stop a treatment or care from the capable person or substitute decision maker, unless there is an emergency.
- In Ontario, advance care planning is a choice and is voluntary.
- A person is not required to record their wishes in writing or in a document such as a living will or advance directives.

[Speak Up Ontario, 2019](#)

The Centre for Studies in Aging & Health at Providence Care

Copyright © CSAH 2020



11

Communicating Wishes

Wishes can change, especially if health conditions change.

- An individual can not predict the course of illness or plan for a particular situation.
- Values and beliefs will guide the care decisions if a person becomes incapable of decision making.
- The substitute decision maker should review wishes periodically.
- Written wishes may be vague and may not deal with the specific situation that might occur.
- Use of written wishes can be risky as they become outdated, misused or misinterpreted.
- See <https://www.makingmywishesknown.ca/> for more guidance.

The Centre for Studies in Aging & Health at Providence Care

Copyright © CSAH 2020



12

eFit eLearning Course Handout

Speak Up Ontario

Click the link below to watch a brief video on Advance Care Planning:

<https://www.speakuontario.ca/resource/advance-care-planning-in-ontario-video-english/>

OPCN 2019

The Centre for Studies in Aging & Health at Providence Care

Copyright © CSAH 2020



13



You have completed the Advance Care Planning eLearning Course!

For more information on this and other topics, please visit our [eFit Resources for Individuals & Caregivers on www.sagelink.ca](http://www.sagelink.ca).

We appreciate your feedback. Please contact info@sagelink.ca if you have suggestions, comments or have any questions.

The Centre for Studies in Aging & Health at Providence Care

Copyright © CSAH 2019



14

References

- Hospice Palliative Care Ontario. (2016). Leadership in Advance Care Planning in Ontario. Retrieved from https://www.speakupontario.ca/wp-content/uploads/2018/07/Leadership_ACP_Ont_April2016.pdf
- Government of Ontario. (1996). Ontario Health Care Consent Act, 1996, S.O. 1996, c. 2. Retrieved from <https://www.ontario.ca/laws/statute/96h02>
- Ministry of the Attorney General. (2017). Powers of attorney. Retrieved from <https://www.attorneygeneral.jus.gov.on.ca/english/family/pgt/incapacity/poa.php>
- Speak Up Ontario. (2019). Part 2: Substitute Decision Makers. Retrieved from <https://www.speakupontario.ca/resource-guide/part-2-substitute-decision-makers/>